

Beginning Billing Workshop Secure Web Portal 837I

Colorado Medicaid
2014



Training Objectives

- Web Portal
 - Basic overview & functions
 - Maintaining user, provider & member data
- User access & roles
- Eligibility verification & response
- 837I (Institutional) claims
 - Collection of information that creates one
 - How to submit
- Accessing reports



Web Portal Advantages

- Convenient, user-friendly & easily accessible
- Available 24 hours/7 days per week
- Quick response to claim entries
- Available anywhere internet can be accessed



Trading Partner

- What is a Trading Partner (TP)?
 - Organization or provider TP number is assigned to



Trading Partner Administrator (TPA)

What is a TPA?

Information security point of contact between Department & provider's office

User appointed by organization or provider

TPA's username assigned by State Security Administrator

- Username begins with COTP, includes TP number, & ends with an "A" (COTP123456A)

What does the TPA do?

Tasks include assigning roles, adding /removing users

CMAP Web Portal technical TPA should know exact duties of each user they add to the system

This person should be readily available to users who access the Web Portal weekly

Billing Agencies / Agents

- Do not have authority to request password resets for Web Portal User Names assigned to Providers
- Issued own Trading Partner ID for purposes of billing on behalf of provider
 - When calling help desk for password resets, be prepared to self-identify as individuals submitting claims on behalf of provider
- Department reserves right to revoke or suspend previously granted user access when security violations or fraudulent activity suspected



Web Portal Login Rules

- Only **one** valid login session can be open at a time
- For security, users automatically logged-out after 30 minutes of inactivity
- Passwords
 - Are case-sensitive
 - Must be between 8 & 16 characters
 - Must contain at least one alphabetic & one numeric character
 - Cannot be re-used
- For login problems, use “I forgot my password” link on login page or contact TPA



NEW! Department Website

1.

<https://www.colorado.gov/hcpf>

www.colorado.gov/hcpf

COLORADO

Department of Health Care
Policy & Financing

Home

For Our Members

For Our Providers

For Our Stakeholders

Bo

2.

For Our Providers

We administer Medicaid, Child Health Plan Plus, and other health care programs for Coloradans who qualify.

Explore
Benefits



Apply
Now



Find
Doctors



Get
Help



Feeling Sick?

For medical advice, call the Nurse Line:

800-283-3221



Get Covered.
Stay Healthy.

colorado.gov/health

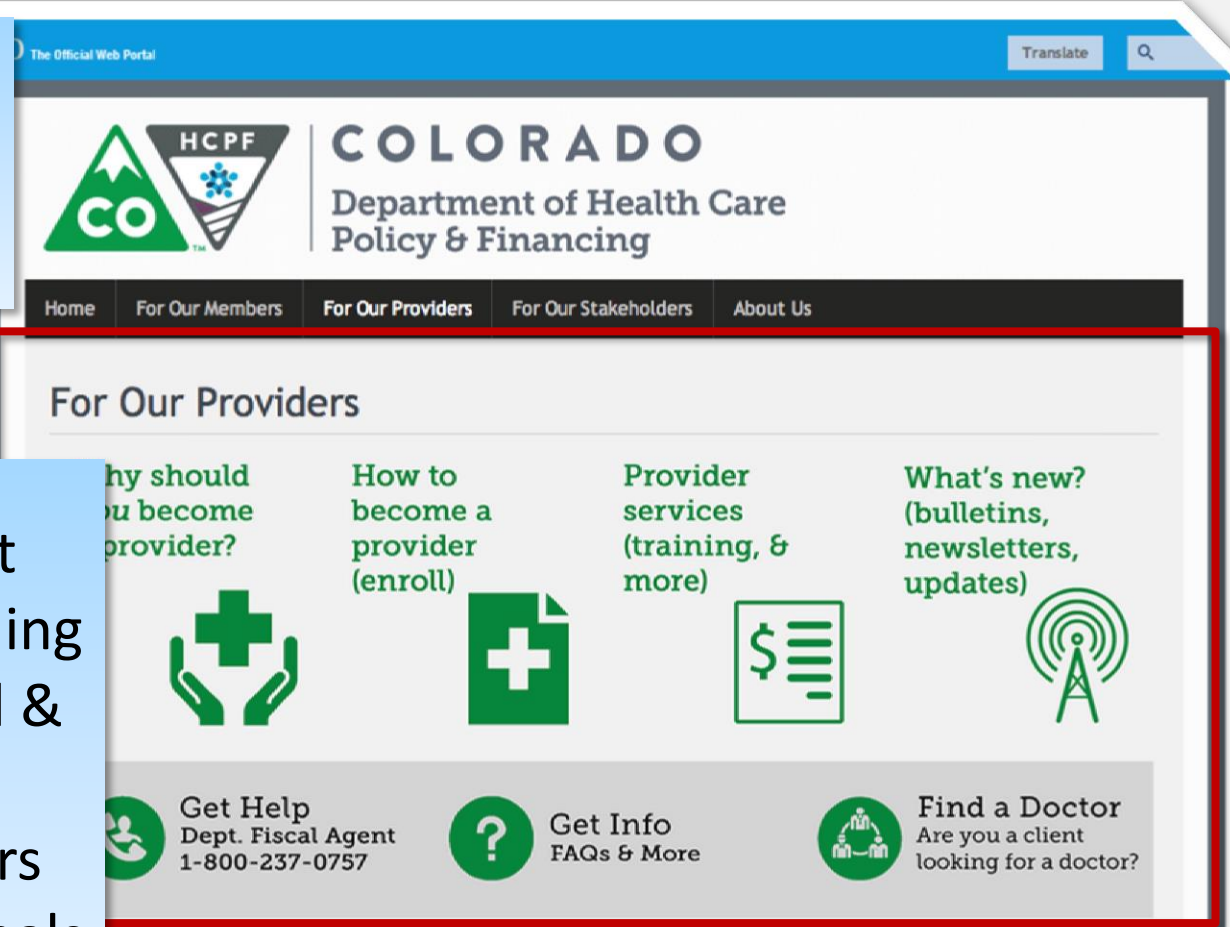


NEW! Provider Home Page


Find what
you need
here



Contains important
information regarding
Colorado Medicaid &
other topics of
interest to providers
& billing professionals



Web Portal Login Page



Department of Health Care Policy
and Financing

Related Sites: [Provider Services](#) [CBMS](#) [CHP+](#) [CICP](#) [CPPC](#) [Old Age Pension](#) [HIPAA](#)

Colorado Medical Assistance Program Web Portal

Login

Access to this application is restricted to those who have been authorized by the Colorado Department of Health Care Policy and Financing. The department is tracking all users in the system and all uses of the system. All unauthorized activity will be prosecuted to the full extent of the law.

User Name:*

Password:*

[Login](#) [Change Password](#)

Note: Password is case sensitive

[I forgot my user name.](#)
[I forgot my password.](#)

System Status Messages:
The Portal is currently available.

Colorado Department of Health Care Policy and Financing - 1570 Grant Street Denver, Colorado 80203-1818

Log-in to access Web Portal

Securely reset password or
request user name here



Web Portal Main Page

Department of Health Care Policy and Financing

Related Sites: [Provider Services](#) [CBMS](#) [CHP+](#) [CICP](#) [CPPC](#) [Old Age Pension](#) [HIPAA](#)

[Main](#) [Help](#) [Log Out](#)

Welcome

Welcome to the Colorado Medical Assistance Program

Trading Partner ID-

Secure Web Portal

What's New!

All Colorado Medical Assistance Program Web Portal users must have their own **User Name** and **Password**. Sharing login information is prohibited. Trading Partner Administrators can create new users by selecting **Administration** → **User Maintenance** from the left-hand navigation menu. Please see the [Help](#) menu option, the *TPA User Guide*, and available training for more information.

System Status Messages

Claims	Last Week	First Week
Dental Claims		
Professional Claims		
Institutional Claims		

Eligibility	Last Week	First Week

PAR	Last Week	First Week

Based on your access rights Training, User Guides, and Help may be available in the upper gray bar or via the menu buttons.

A Trading Partner Administrator's first task should be to set up the users for their Trading Partner. Locate the Administration button in the menu and select User Maintenance. Additional information can be found in the Training and the User Guides.

Frequently Asked Questions

User Profile Maintenance

BUS

SAVE System

Eligibility

Claims

PAR

File and Report Service

Data Maintenance

Medicaid Provider Lookup

Code Set Maintenance

Administration

System Reports

System Maintenance

PORTAL MANAGER

Web Portal Training

Reset Login

(MMIS) Provider Data Maintenance

How is the Portal working?

What's New

User Access dependent on roles assigned to user by TPA

Web Portal Main Page

Department of Health Care Policy and Financing

Related Sites: [Provider Services](#) [CBMS](#) [CHP+](#) [CICP](#) [CPPC](#) [Old Age Pension](#) [HIPAA](#)

[Main](#) [Help](#) [Log Out](#)

Welcome Welcome to the Colorado Medical Assistance Program

Trading Partner ID- Secure Web Portal

Frequently Asked Questions

- User Profile Maintenance
- BUS
- SAVE System
- Eligibility
- Claims
- PAR
- File and Report Service
- Data Maintenance
- Medicaid Provider Lookup
- Code Set Maintenance
- Administration**
- System Reports
- System Maintenance
- PORTAL MANAGER
- Web Portal Training
- Reset Login
- (MMIS) Provider Data Maintenance

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Claims	Last Week	First Week
Dental Claims		
Professional Claims		
Institutional Claims		

Eligibility	Last Week	First Week

PAR	Last Week

Administration → **User Maintenance**

- To assign roles to users, TPA must access **Administration** then **User Maintenance**

User Lookup Screen

Department of Health Care Policy and Financing

Related Sites: [Provider Services](#) [CBMS](#) [CHP+](#) [CICP](#) [CPPC](#) [Old Age Pension](#) [HIPAA](#)

[Main](#) [Help](#) [Log Out](#)

User Lookup

User Name	Last Name	First Name

Page 1 of 1 Page

[\[Previous Page\]](#) [\[Next Page\]](#)

Search Criteria:

* * *

Add New User

User Name :

- Lists User Names of those who have access under the assigned Trading Partner number
- TPA may add, delete, update & change the user information

- TPA may add a new user here

User Maintenance Screen

Department of Health Care Policy and Financing

Related Sites: [Provider Services](#) [CBMS](#) [CHP+](#) [CICP](#) [CPPC](#) [Old Age Pension](#) [HIPAA](#)

[Main](#) [Help](#) [Log Out](#)

User Maintenance

Last Name: * First Name: *

User Name: * Middle Initial:

Password: Confirm Password:

☐ Suspended
☐ Session Locked

Roles

Available:

RESTRICTED ADMIN
TRADING PARTNER ADMIN
ELIGIBILITY INQUIRY USER
CLAIMS USER
PARS USER
PROVIDER(MMIS)

>
<

Assigned: *

Login History:

Last Successful Login:

Last Password Change:

Failed Login Count:

Last Failed Login:

TPA assigns:

- user information
- assign user roles

TPA can:

- reset passwords
- un-suspend accounts

Restricted Admin:

- Limited authority
- reset passwords
- un-suspend accounts



User Roles

Understanding User Names and Roles” quick sheet:

Lists differences between TPA & regular user

Includes a breakdown of what each role of users can do in Web Portal

Available at colorado.gov/hcpf
Provider Services → Colorado Medical Assistance Program Web Portal

MMIS Provider Data Maintenance Access

Department of Health Care Policy and Financing

Related Sites: Provider Services CBMS CHP+ CACP CPPC Old Age Pension HIPAA

Main Help Log Out

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(MMIS) Provider Data Maintenance (MMIS) Provider Data Maintenance User Guide

- To view, correct, verify or update provider's file maintained in MMIS, users must access **MMIS Provider Data Maintenance** then MMIS Provider Data Maintenance

MMIS Provider Inquiry Screen



The screenshot shows the MMIS Provider Inquiry screen. At the top is a blue header with the Colorado State seal on the left, the text "Department of Health Care Policy and Financing" in the center, and a mountain graphic on the right. Below the header is a navigation bar with links: "Related Sites: Provider Services CBMS CHP+ CACP CPPC Old Age Pension HIPAA" and "Main Help Log Out". The main content area is titled "MMIS Provider Inquiry". It contains two input fields: "Provider ID: *" and "Tax ID/SSN: *", both with red asterisks. A red box highlights these fields, and a red arrow points from the box to a callout. Below the fields are "Submit" and "Cancel" buttons. At the bottom, there is a footer with the address "Colorado Department of Health Care Policy and Financing - 1570 Grant Street Denver, Colorado 80203-1818", a "Contact Us: Help Desk" button, and a "DEPT. HOME" button. There are also links for "HCPF Home", "StateHome", "Privacy Statement", and "Site Map".

Department of Health Care Policy and Financing

Related Sites: Provider Services CBMS CHP+ CACP CPPC Old Age Pension HIPAA

Main Help Log Out

MMIS Provider Inquiry

Provider ID: *

Tax ID/SSN: *

Submit Cancel

Colorado Department of Health Care Policy and Financing - 1570 Grant Street Denver, Colorado 80203-1818

Contact Us: Help Desk

DEPT. HOME


HCPF Home - StateHome

Privacy Statement Site Map

- Enter 8-digit Medicaid ID & either the Social Security or Federal Tax ID of provider to access MMIS information



MMIS Provider Information

 Department of Health Care Policy and Financing

Related Sites: [Provider Services](#) [CBMS](#) [CHIP+](#) [CICP](#) [CPPC](#) [Old Age Pension](#) [HIPAA](#)

[Main](#) [Help](#) [Log Out](#)

MMIS Provider Information - *Questions on your provider information should be directed to ACS at 1-800-237-0757*

Provider ID: _____ Tax ID/SSN: _____ Provider Name (Legal Name): _____ Status: ACTIVE Status Effective Date: _____

Medical Home Provider Effective Date: _____ DBA: _____

National Provider Identifier: _____

Address and Publications | Medicare/License Information | Provider Affiliations | ACC Provider Opt-In/Opt-Out

Location Address ☐ Save to Portal)
(PO Box and intersections are not allowed)

Address*: _____
Suite # or C/O: _____
City*: _____
State*: CO Zip Code*: _____
County*: _____
Phone*: _____ Fax: _____

Billing Address ☐ Save to Portal)
☐ Same as Location ☐ Same as Mailing)

Address: _____
Suite # or C/O: _____
City: _____
State: _____ Zip Code: _____
County: _____
Phone: _____ Fax: _____

Mailing Address ☐ Save to Portal)
☐ Same as Billing ☐ Same as Location)

Address: _____
Suite # or C/O: _____
City: _____
State: _____ Zip Code: _____
County: _____
Phone: _____ Faxback: _____
Eligibility: _____

Publication Information

Current Media: NONE
Change Media To: _____
E-mail Address: _____

(Note: Updates that are not allowed can be performed by submitting a paper request form.)

- National Provider Identifier (NPI) appears in NPI field if already registered in MMIS
- Any updates take approximately 24 hours

- The user that has their e-mail listed here will receive a link to the monthly bulletin

MMIS Provider Information

Department of Health Care Policy and Financing

Related Sites: Provider Services CBMS CHP+ CACP CPPC Old Age Pension HIPAA

Main Help Log Out

MMIS Provider Information - Questions on your provider information should be directed to ACS at 1-800-237-0757

Provider ID: Tax ID/SSN: Medical Home Provider Effective Date: DBA: Provider Name (Legal Name): Status: ACTIVE Status Effective Date:

National Provider Identifier:

Address and Publications Medicare/License Information Provider Affiliations ACC Provider Opt-In/Opt-Out

Add/Del Medicare ID Begin Date Type License Number End Date

Medicare ID: Begin Date: Type: Add Remove

Please contact Provider Services to update your license information.

Print Submit Cancel

(Note: Updates that are not allowed can be performed by submitting a paper request form.)

- License information is presented as “view-only” & may not be updated through Web Portal
- Updates may be submitted to Fiscal Agent on paper

MMIS Provider Information

The screenshot shows the MMIS Provider Information web application. At the top is the Colorado Department of Health Care Policy and Financing header with the state seal and navigation links: Related Sites, Provider Services, CBMS, CHP+, CICP, CPPC, Old Age Pension, HIPAA, Main, Help, and Log Out. Below the header is the "MMIS Provider Information" section with a note: "Questions on your provider information should be directed to ACS at 1-800-237-0757".

Provider ID: _____ Tax ID/SSN: _____ DBA: _____ Provider Name (Legal Name): _____ Status: ACTIVE Status Effective Date: _____

National Provider Identifier: _____

Address and Publications | Medicare/License Information | **Provider Affiliations** | ACC Provider Opt-In/Opt-Out

Add/Del	Provider ID	Provider Name	Begin Date	End Date

Provider ID: _____ Begin Date: _____ End Date: _____

* * *

(Note: Updates that are not allowed can be performed by submitting a paper request form.)

- View, add, or remove affiliations here
- Once Submitted, provider confirmation page appears
- Check provider error report in File and Report Service (FRS) for errors when necessary



ACC Provider Opt-In/Opt-Out



The screenshot shows the 'ACC Provider Opt-In/Opt-Out' web form. At the top is the header for the 'Department of Health Care Policy and Financing' with the state seal and navigation links. Below the header is the 'MMIS Provider Information' section with fields for Provider ID, Tax ID/SSN, Medical Home Provider Effective Date, DBA, Provider Name (Legal Name), Status (ACTIVE), and Status Effective Date. A 'National Provider Identifier' field is also present. A navigation bar contains four tabs: 'Address and Publications', 'Medicare/License Information', 'Provider Affiliations', and 'ACC Provider Opt-In/Opt-Out' (which is highlighted with a red box). Below the tabs, there are two sections: 'Opt-In as a PCMP Provider' and 'Opt-Out as a PCMP Provider'. Each section has a checkbox and a list of RCCO Affiliations (Region 1 - Rocky Mountain Health Plans, Region 2 - Colorado Access, Region 3 - Colorado Access, Region 4 - Integrated Community Health Partners, LLC, Region 5 - Colorado Access, Region 6 - Colorado Community Health Alliance, Region 7 - Community Health Partnership). Below these lists are 'Accept Selections' and 'Reset' buttons. A note states: '(Note: If you choose to Opt-In as a PCMP Provider, PCMP Agreement will be created in a separate page.)'. At the bottom are 'Print', 'Submit', and 'Cancel' buttons, followed by another note: '(Note: Updates that are not allowed can be performed by submitting a paper request form.)'.

Department of Health Care Policy and Financing

Related Sites: Provider Services CBMS CHIP+ CICIP CPPC Old Age Pension HIPAA

Main Help Log Out

MMIS Provider Information - Questions on your provider information should be directed to ACS at 1-800-237-0757

Provider ID: Tax ID/SSN: Medical Home Provider Effective Date: DBA: Provider Name (Legal Name): Status: ACTIVE Status Effective Date:

National Provider Identifier:

Address and Publications Medicare/License Information Provider Affiliations **ACC Provider Opt-In/Opt-Out**

[View PCMP State Contract](#)

Opt-In as a PCMP Provider ☐ Opt-Out as a PCMP Provider ☐

RCCO Affiliation

Region 1 - Rocky Mountain Health Plans
Region 2 - Colorado Access
Region 3 - Colorado Access
Region 4 - Integrated Community Health Partners, LLC
Region 5 - Colorado Access
Region 6 - Colorado Community Health Alliance
Region 7 - Community Health Partnership

Accept Selections Reset

(Note: If you choose to Opt-In as a PCMP Provider, PCMP Agreement will be created in a separate page.)

Print Submit Cancel

(Note: Updates that are not allowed can be performed by submitting a paper request form.)

- Make selections to become a PCMP with ACC Program
- Allows provider to partner with different RCCOs and serve members in ACC Program
- Elect to affiliate with RCCOs
 - Required to electronically sign contract
- Opt to remove affiliation with RCCO

Provider Maintenance Access

Department of Health Care Policy and Financing

Related Sites: Provider Services CBMS CHP+ CACP CPPC Old Age Pension HIPAA

Main Help Log Out

Welcome to the Colorado Medical Assistance Program

Secure Web Portal

Trading Partner ID-

Frequently Asked Questions

User Profile Maintenance

BUS

SAVE System

Eligibility

Claims

PAR

File and Report Service

Data Maintenance

Medicaid Provider Lookup

Code Set Maintenance

Administration

System Reports

System Maintenance

PORTAL MANAGER

Web Portal Training

Reset Login

(MMIS) Provider Data Maintenance

What's New!

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System Status Messages

Claims Last Week

Dental Claims

Professional Claims

Institutional Claims

Eligibility Last Week

PAR Last Week

Client Maintenance

Provider Maintenance

User Guide

A Trading Partner Administrator's first task should be to set up the users for their Trading Partner. Locate the Administration button in the menu and select User Maintenance. Additional information can be found in the Training and the User Guides.

- Add all billing and rendering providers associated with TP ID here
- This information is required before submitting claims

Provider Lookup Screen

Department of Health Care Policy and Financing

Related Sites: [Provider Services](#) [CBMS](#) [CHP+](#) [CICP](#) [CPPC](#) [Old Age Pension](#) [HIPAA](#)

[Main](#) [Help](#) [Log Out](#)

Provider Lookup

Provider ID	Type	Name

Page 1 of 1 Page

[\[Previous Page\]](#) [\[Next Page\]](#)

Search Criteria:

* * *

Add New Provider

Provider ID:

- Lists Provider Names of those who have access under the assigned Trading Partner number
- TPA may add, delete, update & change the user information

- TPA may add a new provider here

Provider Maintenance Screen

Department of Health Care Policy and Financing

Related Sites: [Provider Services](#) [CBMS](#) [CHP+](#) [CICP](#) [CPPC](#) [Old Age Pension](#) [HIPAA](#)

[Main](#) [Help](#) [Log Out](#)

Provider Maintenance

Provider ID:

Type: * ☒ Individual ☐ Organization

Last Name: * First Name: *

Organization Name:

Provider Identifier

If required, please enter the National Provider Identifier

ID Qualifier: * National Provider Identifier ID: *

Note: Address, City, State and Zip Code are required when the Provider is Billing or Service Facility

Categories: ☒ Billing ☐ Service Facility

Address: *

City: *

State: * Zip Code: *

• If required to bill using an NPI, the NPI must be used as the *ID Qualifier*

- When adding a *billing* provider in your database, be sure the “billing” box is checked
- Each provider must be added one at a time

Eligibility Inquiry Access

Department of Health Care Policy and Financing

Related Sites: Provider Services CBMS CHP+ CACP CPPC Old Age Pension HIPAA

Main Help Log Out

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Batch Eligibility Inquiry

User Guide

System Status Messages

Claims	Last Week
Dental Claims	
Professional Claims	
Institutional Claims	
Eligibility	Last Week
PAR	Last Week

- To submit an interactive eligibility request or a Batch Eligibility Inquiry, users must access **Eligibility** then either **Eligibility Inquiry** or **Batch Eligibility Inquiry**

Eligibility Inquiry and Verification (270)

The screenshot shows the 'Client Eligibility Inquiry and Verification' web form. At the top is the Colorado Department of Health Care Policy and Financing header with the state seal and navigation links. The form is divided into sections: 'Client Eligibility Inquiry and Verification' and 'Client Detail'. In the first section, the 'Provider ID' field is highlighted with a red box and labeled 'National Provider Identifier' with a red arrow. The 'Service Type Code' is set to '30 Health Benefit Plan Coverage'. 'From DOS' and 'Through DOS' fields are marked with asterisks. The 'Client Detail' section includes fields for 'State ID', 'DOB', 'Last Name', 'First Name', and 'SSN'. A red box highlights a text area stating that at least one combination of data must be entered: a. State ID and DOB (Preferred Criteria), b. Last Name, First Name, and DOB, c. SSN, Last Name, and First Name, or d. SSN and DOB. A red arrow points from this box to the right. At the bottom are 'Submit', 'Cancel', and 'Reset' buttons.

Client Eligibility Inquiry and Verification

Provider ID: National Provider Identifier:

Service Type Code: * 30 Health Benefit Plan Coverage

From DOS : * Through DOS : *

Client Detail

State ID: DOB:

Last Name: First Name: SSN:

To identify the client for an eligibility inquiry, at least one of the following combinations of data must be entered:

- a. State ID and DOB (Preferred Criteria)
- b. Last Name, First Name, and DOB
- c. SSN, Last Name, and First Name
- d. SSN and DOB

Submit Cancel Reset

- Users should check a members eligibility using the Billing Provider ID

- There are different scenarios for conducting a search
- Fields noted with “*” are required

Eligibility Request Response (271)

[Print](#)[Return To Eligibility Inquiry](#)

Eligibility Request

Provider ID: National:

From DOS: Throu

Client Detail

State ID: D

Last Name: First

CO MEDICAL ASSISTAN

Response Creation Date & Time: 05/

[Contact Information for Questions or](#)

Provider Relations Number: 800-237

[Requesting Provider](#)

Provider ID:

Name:

[Client Details](#)

Name:

State ID:

[Client Eligibility Details](#)

Eligibility Status: **Eligible**

Eligibility Benefit Date:
04/06/2011 - 04/06/2011

Guarantee Number: **111400000000**

Coverage Name: Medicaid

PREPAID HEALTH PLAN OR ACCOUNTABLE CARE COLLABORATIVE

Eligibility Benefit Date:
04/06/2011 - 04/06/2011

Messages:

MHPROV Services

Provider Name:

COLORADO HEALTH PARTNERSHIPS LLC

Provider Contact Phone Number:
800-804-5008

Information appears in sections (Requesting Provider, Member Details, Member Eligibility Details, etc.). Use the scroll bar to the right to view more details.

A successful inquiry notes a Guarantee Number. Print a copy of the response for the member's file when necessary.

As a reminder, information received is based on what is available through the Colorado Benefits Management System (CBMS). Updates may take up to 72 hours.



Member Maintenance Access

Department of Health Care Policy and Financing

Related Sites: Provider Services CBMS CHP+ CACP CPPC Old Age Pension HIPAA

Main Help Log Out

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System Maintenance

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Reset Login

(MMIS) Provider Data Maintenance

Provider Maintenance

User Guide

A Trading Partner Administrator's first task should be to set up the users for their Trading Partner. Locate the Administration button in the menu and select User Maintenance. Additional information can be found in the Training and the User Guides.

- Choose **Data Maintenance** then **Client Maintenance** to update, delete, or make changes to member information
- Changes do not effect MMIS or CBMS



Member Lookup Screen

Department of Health Care Policy and Financing

Related Sites: [Provider Services](#) [CBMS](#) [CHP+](#) [CICP](#) [CPPC](#) [Old Age Pension](#) [HIPAA](#)

[Main](#) [Help](#) [Log Out](#)

Client Lookup

State ID	Last Name	First Name	SSN	Date of Birth

Page 1 of 1 Page

[\[Previous Page\]](#) [\[Next Page\]](#)

Search Criteria:

* * *

Add New Client

State ID:

- Member is automatically added to provider's Member Database when a successful eligibility inquiry is processed

- User may add a new member here

Member Maintenance Screen

Department of Health Care Policy and Financing

Related Sites: [Provider Services](#) [CBMS](#) [CHP+](#) [CICP](#) [CPPC](#) [Old Age Pension](#) [HIPAA](#)

[Main](#) [Help](#) [Log Out](#)

Client Maintenance

State ID: * DOB: *

Last Name: * First Name: *

Middle Initial:

SSN: Gender:

Patient Account Number: Medicare Number:

Address: *

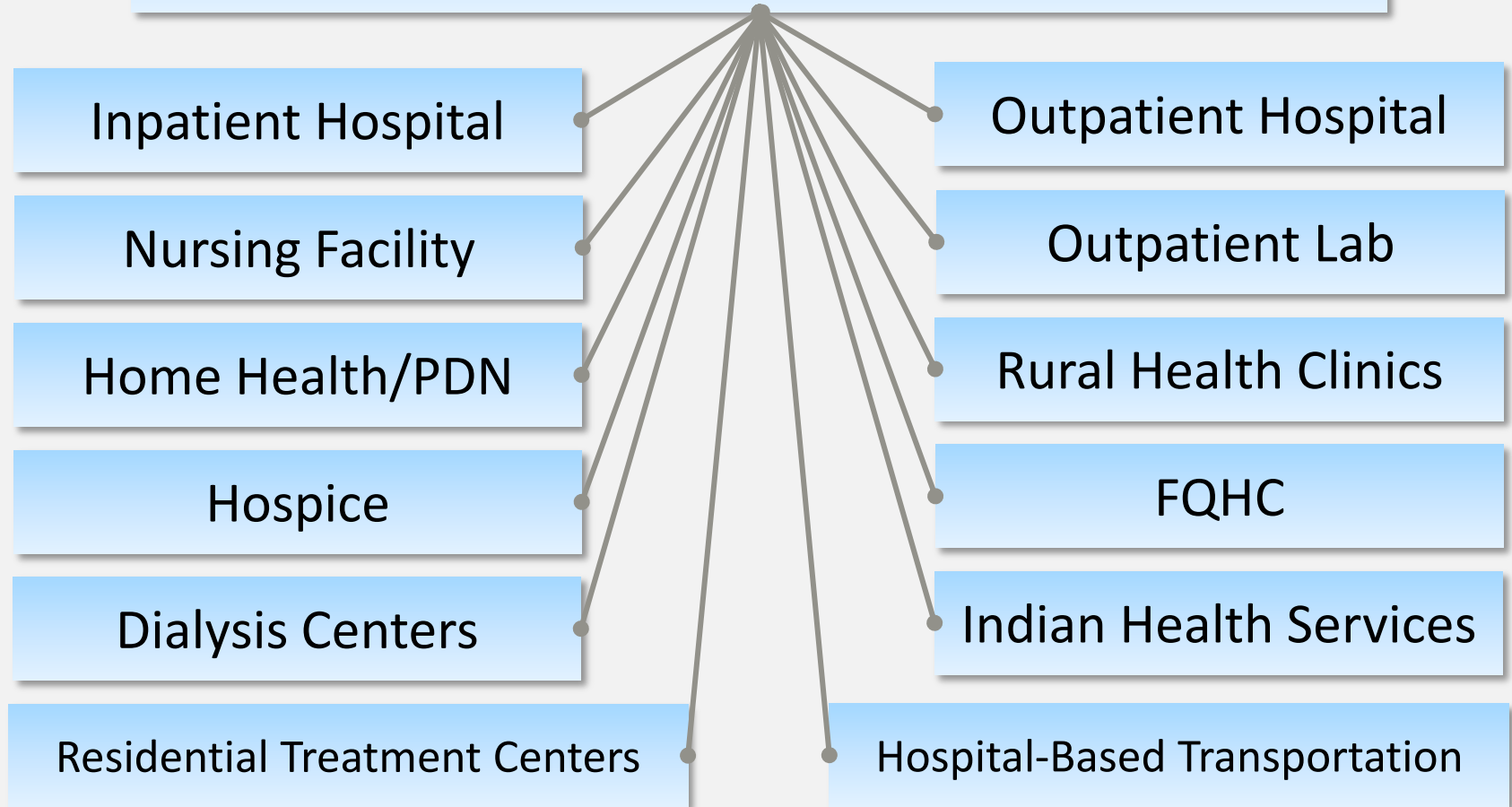
City: *

State: * Zip Code: *

• Successful eligibility inquiry adds member's information, with exception of Patient Account # (assigned by provider)

UB-04

Who completes the UB-04?



Institutional Claim Access

Department of Health Care Policy and Financing

Related Sites: Provider Services CBMS CHP+ CACP CPPC Old Age Pension HIPAA

Main Help Log Out

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System Status Messages

Claims	Last Week	First Week
Dental Claims		
Professional Claims		
Institutional Claims		
Eligibility	Last Week	
PAR	Last Week	

Frequently Asked Questions

User Profile Maintenance

BUS

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(MMIS) Provider Data Maintenance

Professional

Dental

Institutional

Claim Status Inquiry

Activity Tracing Report

User Guide

A Trading Partner Administrator's first task should be to set up the users for their Trading Partner. Locate the Administration button in the menu and select User Maintenance. Additional information can be found in the Training and the User Guides.

• Choose **Institutional** option under Claims on main menu to submit 837I claim

Institutional Claim Lookup Screen

Department of Health Care Policy and Financing

Related Sites: Provider Services CBMS CHP+ CACP CPPC Old Age Pension HIPAA

Main Help Log Out

Institutional Claim Lookup

State ID	Claim Status	Client Name	ThruDOS	Prov ID	PAR ID	Total Charge	Entry Date	Orig /

default result set based on the last 120 days of Date of Entry

Page 0 of 0

Page Go Print

[\[Previous Page\]](#) [\[Next Page\]](#)

Edit Copy Delete View/Print Adjustment ClaimStatus View Claim Response

Search Criteria:

* State ID * Equals

* Entry Date From: Through:

Claims older than 2 years by Date of Submission are regularly purged from the system.

Search Reset

Add New Institutional Claims / Adjustment

Add New Claim Adjustment ☐

Check Status Of Claims:

Claims Status Request

- Choose the **Copy** or **Adjustment** button to add or adjust claims shown on grid

- To submit a new claim, choose **Add New Claim** button
- Check the **Adjustment** box to adjust claims not shown on grid



Member's Info Tab

Client's Info | Claim Info | Other Insurance Info | Diag/Occur/Val/Condition Codes | Procedure Codes | Detail Line Items | Errors

Institutional Claim

Client's Information

State ID :* Search Last Name :* Search First Name :* MI :
Street Address : City : State : Zip :
DOB :* Gender :* Patient Account Number :*

Claim Submission Type

Claim TCN : Adjustment TCN :
Facility Type Code :* Frequency Type Code :*

Billing Provider Information If required, please add the National Provider Identifier to the provider's maintenance record.

Provider ID :* National Provider Identifier : Taxonomy Code :
Release of Information :*

Other Provider Information If required, please provide the National Provider Identifier.

Provider ID : National Provider Identifier :
Last Name : First Name :
Role: ☐ Attending ☐ Operating ☐ Other ☐

ProviderID	National Provider ID	Taxonomy Code	Name	Role
------------	----------------------	---------------	------	------

Client's Info | Claim Info | Other Insurance Info | Diag/Occur/Val/Condition Codes | Procedure Codes | Detail Line Items | Errors

- Enter new or adjusted claim data on this screen

- **Frequency Type Code** always set to original when submitting new claims



Clinical Laboratory Improvement Amendments (CLIA) Field

- CLIA Number only needs to be entered once if related to all procedure codes for the claim
- For multiple CLIA Numbers for multiple procedure codes, continue entering on Detail Line Items tab for each claim detail line
- New field validation ensures CLIA Number entered using following format: “99D99999999”
- Beginning July 1, 2011, failure to submit correct CLIA Number with claim will result in claim denial




Claim Info Tab

Client's Info | **Claim Info** | Other Insurance Info | Diag/Occur/Val/Condition Codes | Procedure Codes | Detail Line Items | Errors



Institutional Claim

Claim Information

Claim Data

Admit Date:  Admit Hour: Admission Type Code: Admission Source Code:

Discharge Hour: Patient Status:

Statement From Date:  Statement Thru Date: 

Claim Notes/LBOD : Note Reference Code : Delay Reason Code :

Client's Info | Claim Info | Other Insurance Info | Diag/Occur/Val/Condition Codes | Procedure Codes | Detail Line Items | Errors

Save Save & Exit Submit Cancel Reset

- Document the Late Bill Override Date (LBOD) on this tab
- You must choose a *Note Reference* and *Delay Reason Code* if using the Claim Notes/LBOD field




Other Insurance Info Tab

Client's Info | Claim Info | **Other Insurance Info** | Diag/Occur/Val/Condition Codes | Procedure Codes | Detail Line Items | Errors

Institutional Claim

Other Insurance Information

Other Insurance Coverage: 

Insurance Information

Company Name: Policy or Group Number:

Last Name: First Name: MI:

Client Relationship to Insured: Claim Filing Indicator:

Amount Insurance Paid: \$ Estimated Amount Due: \$ Date Insurance Paid/Denied:

Insurance Information

Company Name: Policy or Group Number:

Last Name: First Name: MI:

Client Relationship to Insured: Claim Filing Indicator:

Amount Insurance Paid: \$ Estimated Amount Due: \$ Date Insurance Paid/Denied:

Medicare Information

Medicare ID: Paid/Denied Date: Amount Paid: \$

Coinurance: \$ Deductible: \$

Client's Info | Claim Info | **Other Insurance Info** | Diag/Occur/Val/Condition Codes | Procedure Codes | Detail Line Items | Errors

Save Save & Exit Submit Cancel Reset

Five options to choose from:

- None (default)
- Medicare
- One TPL
- Two TPLs
- Medicare and one TPL



Codes Tab

Client's Info | Claim Info | Other Insurance Info | **Diag/Occur/Val/Condition Codes** | Procedure Codes | Detail Line Items | Errors

Institutional Claim

Diagnosis Codes:
The Present on Admission (POA) Indicator is required for Inpatient Hospital claims to indicate whether the condition was present at the time the client was admitted to the facility.

[Diagnosis*](#) Present on Admission indicator Admitting ☐ Principal ☐ E Code ☐

Diagnosis Code POA Indicator Type

Occurrence Codes:
[Occurrence Code:](#) Date:

Span Code: From Date: To Date:

Occurrence Span Code	From Date	Through Date
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Value Codes:
[Value Code:](#) Amount:

Value Code Amount

Condition Codes:
[Condition Code:](#)

Condition Code

Client's Info | Claim Info | Other Insurance Info | **Diag/Occur/Val/Condition Codes** | Procedure Codes | Detail Line Items | Errors

- Inpatient hospital claims submitted through the Web Portal require the inclusion of a **POA indicator**



Procedure Codes Tab

Client's Info | Claim Info | Other Insurance Info | Diag/Occur/Val/Condition Codes | **Procedure Codes** | Detail Line Items | Errors

Institutional Claim

Procedure Codes A Procedure Date is required for any Procedure Code

Procedure Code: ☐ Principal Procedure: ☐

Procedure Code Date Principal/Other

Treatment Authorization:

Authorization Code A: Authorization Code B: Medical Record Number:

Client's Info | Claim Info | Other Insurance Info | Diag/Occur/Val/Condition Codes | **Procedure Codes** | Detail Line Items | Errors

- The Procedure Codes Tab collects information relating to the ICD9-CM surgical procedure codes as well as treatment authorization



Detail Line Item Tab

Client's Info | Claim Info | Other Insurance Info | Diag/Occur/Val/Condition Codes | Procedure Codes | Detail Line Items | Errors

Institutional Claim

Total Charge: \$ *

Detail Line Items

Revenue Code: *
HCPCS Code: *
Modifiers:
NDC:
Date of Service:
Units Of Service: *
Non-Covered Charges: \$

Charge Amount: *\$

ADD LINE ITEM UPDATE LINE ITEM DELETE LINE ITEM

LI	Revenue	HCPCS	M1	M2	M3	M4	NDC	Charge	Amt	DOS	Units	Non-Covered
----	---------	-------	----	----	----	----	-----	--------	-----	-----	-------	-------------

Number Of Line Items : 0
Total Amount : 0

☐ Check here to accept the [Terms and Conditions](#)

Client's Info | Claim Info | Other Insurance Info | Diag/Occur/Val/Condition Codes | Procedure Codes | Detail Line Items | Errors

Save Save & Exit Submit Cancel Reset

- **Total Amount** for claim automatically calculated
- The **Total Charge** field (top left corner) must be the same amount
- Each line item is the **Charge Amount**

- Before submitting claim, must check the **Terms and Conditions** box



Errors Tab

Client's Info | Claim Info | Other Insurance Info | Detail Line Items | Transportation Info | **Errors**

Professional Claim

Data Validation Errors

Service Line #	Code	Description
0	2013	Patient's Account Number must be entered.
0	2018	Billing Provider ID must be entered.
0	2020	Signature on File must be selected (Y or N)
0	2021	Release of Information must be selected.
0	2025	Pregnancy Indicator must be selected (Y or N)
0	2032	Primary Diagnosis must be entered.
0	2123	Total Charge must be entered.
0	2151	There must be at least one Detail Line on the claim.
0	2161	The Terms and Conditions on the Detail Line Items tab must be accepted.

PRINT

Client's Info | Claim Info | Other Insurance Info | Detail Line Items | Transportation Info | **Errors**

Save Save & Exit Submit Cancel Reset

- **Service Line # of 0** indicates an error exists on a tab **other than** the Detail Line Item tab
- If the error is related to a detail line item, the Service Line # will be a linked field, and clicking on it will take you to the tab with the error.

Claims Status Inquiry Access

Department of Health Care Policy and Financing

Related Sites: [Provider Services](#) [CBMS](#) [CHP+](#) [CICP](#) [CPPC](#) [Old Age Pension](#) [HIPAA](#)

[Main](#) [Help](#) [Log Out](#)

Welcome to the Colorado Medical Assistance Program

Secure Web Portal

Trading Partner ID-

What's New!

All Colorado Medical Assistance Program Web Portal users must have their own **User Name** and **Password**. Sharing login information is prohibited. Trading Partner Administrators can create new users by selecting **Administration** → **User Maintenance** from the left-hand navigation menu. Please see the [Help menu](#) for the [TPA User Guide](#), and available training for

System Status Messages

Claims Last Week

[Dental Claims](#)

[Professional Claims](#)

[Institutional Claims](#)

Eligibility Last Week

PAR Last Week

Frequently Asked Questions

User Profile Maintenance ▶

BUS ▶

SAVE System

Eligibility ▶

Claims

PAR ▶

File and Report Service ▶

Data Maintenance ▶

Medicaid Provider Lookup ▶

Code Set Maintenance ▶

Administration ▶

System Reports ▶

System Maintenance ▶

PORTAL MANAGER ▶

Web Portal Training ▶

Reset Login

(MMIS) Provider Data Maintenance ▶

Professional

Dental

Institutional

Claim Status Inquiry

Activity Tracing Report ▶

User Guide ▶

A Trading Partner Administrator's first task should be to set up the users for their Trading Partner. Locate the Administration button in the menu and select User Maintenance. Additional information can be found in the Training and the User Guides.

- Choose **Claim Status Inquiry** to inquire about the status of any claim, even ones not submitted through the Web Portal (such as paper claims)

Claims Status Inquiry Access

The screenshot shows the 'Claims Status Request' form. At the top is the Colorado state seal and the department name. Below is a navigation bar with links: Related Sites, Provider Services, CBMS, CHP+, CACP, CPPC, Old Age Pension, HIPAA, Main, Help, and Log Out. The form is divided into three sections: Client Information, Provider Information, and Claim Information. Client Information includes fields for State ID, Last Name, Gender, DOB, First Name, and Patient Account No. Provider Information includes fields for Billing Provider ID, National Provider Identifier, and Name. Claim Information includes fields for TCN, From DOS, and Through DOS. A note states that to submit a Claim Status Request, one of the following must be entered: a. TCN or b. Dates of Service. At the bottom are buttons for Submit, Cancel, and Reset.

Claims Status Request

Client Information :

State ID : *

Last Name : *

Gender :

DOB : *

First Name : *

Patient Account No : *

Provider Information :

Billing Provider ID:

National Provider Identifier:

Name : *

Claim Information :

TCN:

From DOS: Through DOS:

To submit a Claim Status Request one of the following must be entered.

a. TCN

b. Dates of Service.

- All fields noted with an “*” are required
- Refer to your Provider Claim Report (PCR) for details when necessary

File and Report Services Access

Department of Health Care Policy and Financing

Related Sites: [Provider Services](#) [CBMS](#) [CHP+](#) [CICP](#) [CPPC](#) [Old Age Pension](#) [HIPAA](#)

[Main](#) [Help](#) [Log Out](#)

Welcome Welcome to the Colorado Medical Assistance Program

Trading Partner ID: Secure Web Portal

Frequently Asked Questions

- User Profile Maintenance
- BUS
- SAVE System
- Eligibility
- Claims
- PAR

File and Report Service View/Download Reports

Data Maintenance Download Batch Reports

Medicaid Provider Lookup User Guide

Code Set Maintenance

Administration

System Reports

System Maintenance

PORTAL MANAGER

Web Portal Training

Reset Login

(MMIS) Provider Data Maintenance

What's New!

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System Status Messages

Claims Last Week

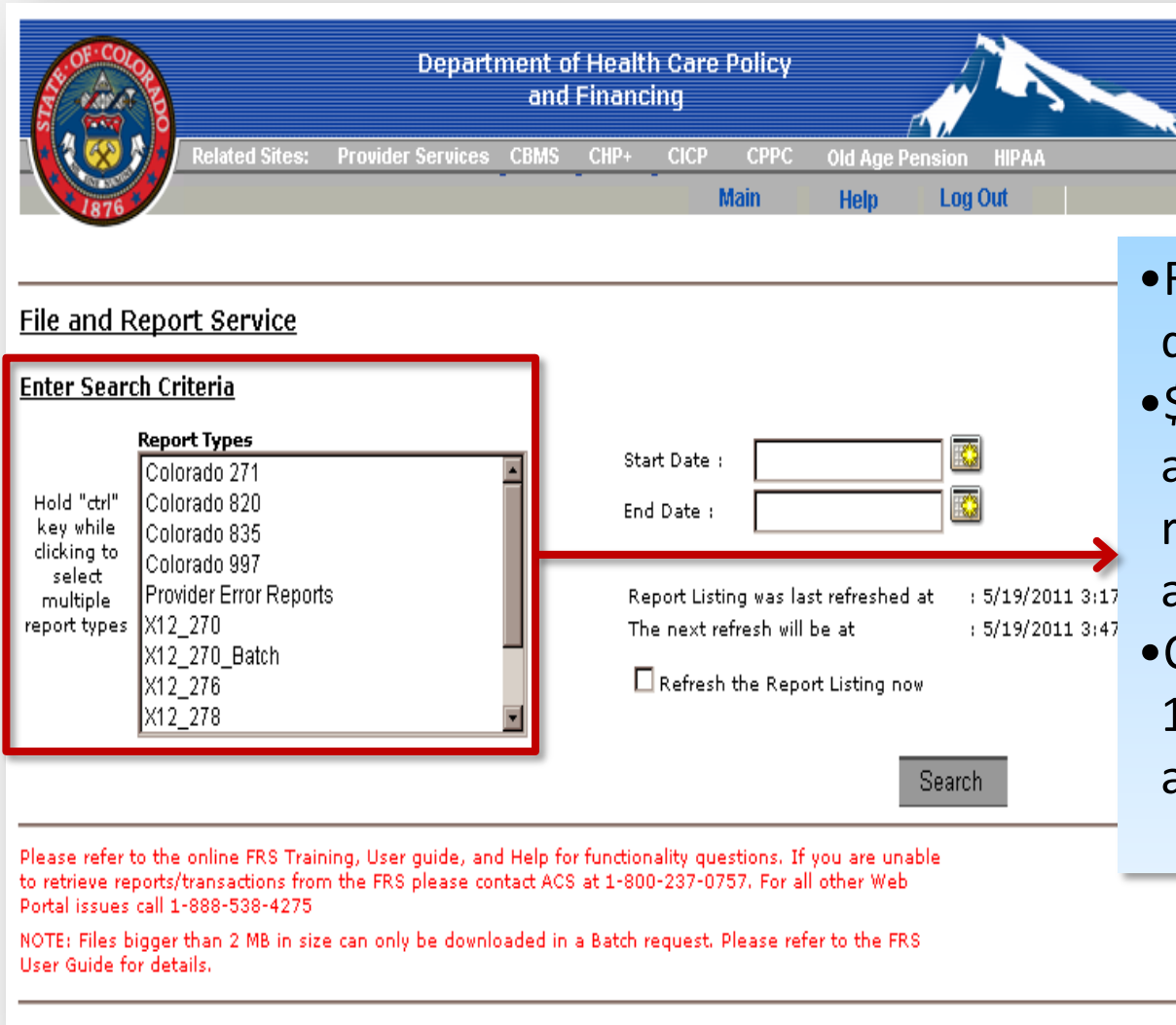
- Dental Claims
- Professional Claims
- Institutional Claims

Eligibility Last Week

PAR Last Week

• Choose **View / Download Reports** from the File and Report Service (FRS) option to access reports

File and Report Services Screen



Department of Health Care Policy and Financing

Related Sites: [Provider Services](#) [CBMS](#) [CHP+](#) [CICP](#) [CPPC](#) [Old Age Pension](#) [HIPAA](#)

[Main](#) [Help](#) [Log Out](#)

File and Report Service

Enter Search Criteria

Hold "ctrl" key while clicking to select multiple report types

Report Types

- Colorado 271
- Colorado 820
- Colorado 835
- Colorado 997
- Provider Error Reports
- X12_270
- X12_270_Batch
- X12_276
- X12_278

Start Date :

End Date :

Report Listing was last refreshed at : 5/19/2011 3:17
The next refresh will be at : 5/19/2011 3:47

☐ Refresh the Report Listing now

Please refer to the online FRS Training, User guide, and Help for functionality questions. If you are unable to retrieve reports/transactions from the FRS please contact ACS at 1-800-237-0757. For all other Web Portal issues call 1-888-538-4275

NOTE: Files bigger than 2 MB in size can only be downloaded in a Batch request. Please refer to the FRS User Guide for details.

- Reports available for 60 days after posting
- \$2.00 charge per page applied for copies requested from fiscal agent
- Contact Fiscal Agent at 1-800-237-0757 for assistance

Medicaid Provider Lookup Access

Department of Health Care Policy and Financing

Related Sites: Provider Services CBMS CHP+ CACP CPPC Old Age Pension HIPAA

Main Help Log Out

Welcome to the Colorado Medical Assistance Program

Secure Web Portal

Trading Partner ID-

Frequently Asked Questions

User Profile Maintenance

BUS

SAVE System

Eligibility

Claims

PAR

File and Report Service

Data Maintenance

Medicaid Provider Lookup

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Reset Login

(MMIS) Provider Data Maintenance

What's New!

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System Status Messages

Claims	Last Week	First Week
Dental Claims		
Professional Claims		
Institutional Claims		

Eligibility	Last Week

PAR	Last Week

rights Training, User Guides, and Help may be gray bar or via the menu buttons.

User Guide Administrator's first task should be to set up the users for their Trading Partner. Locate the Administration button in the menu and select User Maintenance. Additional information can be found in the Training and the User Guides.

- Choose **Medicaid Provider Lookup** option on main menu to search for providers with specialties

Medicaid Provider Lookup Screen

The screenshot shows the Medicaid Provider Lookup interface. At the top is a blue header with the Colorado State seal on the left, the text "Department of Health Care Policy and Financing" in the center, and a mountain graphic on the right. Below the header is a navigation bar with links: "Related Sites:", "Provider Services", "CBMS", "CHP+", "CICP", "CPPC", "Old Age Pension", "HIPAA", "Main", "Help", and "Log Out".

The main content area is titled "Medicaid Provider Lookup". It contains two sections: "General Criteria:" and "Location Criteria:".

General Criteria:

- Provider Type: A dropdown menu with "--No Preference--" selected.
- Provider's Last Name or Clinic Name Begins With: A text input field.

Location Criteria:

- City: A text input field.
- State: A dropdown menu with "Colorado" selected.
- Zip: A text input field.
- County: A dropdown menu with "--No Preference--" selected.

Specialty Criteria:

A list of specialties is displayed in a scrollable box:

- Adolescent Medicine
- Adult Day Service
- Allergy
- Allergy, Pediatric
- Anesthesiology
- BI Adult Day Service
- BI Assistive Technology
- BI Behavioral Programming
- BI Day Treatment
- BI Indep Living Skills Train
- BI Institutional Respite Care
- BI Mental Health Counseling
- BI Personal Care Service
- BI Respite Care
- BI Substance Abuse Counseling
- BI Supported Living Program

To the right of the list is a note: "To Select Multiple Specialties hold down the Ctrl key."

At the bottom of the form, there is a disclaimer: "This lookup contains providers enrolled with Medicaid; it does not identify providers who are currently accepting new patients." Below this is a "12 per page" dropdown, a "Search" button, and a "Reset" button.

- Search limited to Medicaid providers currently enrolled in Colorado Medical Assistance Program

Web Portal Support

- For all password resets & technical support, contact CGI Help Desk: 1-888-538-4275, option 1 or helpdesk.HCG.central.us@cgi.com
- Missing TPA Welcome Letter? Contact HCPF Security Administrators: 303-866-4473
- For Billing Questions, contact Fiscal Agent Provider Services at 1-800-237-0757
- Billing Instructions - choose Provider Services option on top grey menu bar
- End User Training (online) - located in main menu
- User Guides – located in main menu
- Help Guide option – on upper grey menu bar & on each Web Portal page



Thank You!

